

**HAWAII STATE ETHICS COMMISSION**

1001 Bishop Street, ASB Tower Suite 970
Honolulu, Hawaii 96813
P.O. Box 616, Honolulu, Hawaii 96809
Telephone: 587-0460 Fax: 587-0470
email: ethics@hawaiiethics.org

GIFTS DISCLOSURE STATEMENT

(This report covers the period from June 1 of the preceding calendar year through June 1 of this year and is due on June 30)

| | |
|--|---|
| NAME: Trent K. Kakuda | STATE POSITION: Member, Board of Regents |
| STATE AGENCY: University of Hawaii | STATE TEL. NO.: 956-8213 |
| STATE MAILING ADDRESS: 2444 Dole Street, Bachman Hall 209 Honolulu, HI 96822 | |

| 1 | DONOR | 2 | DESCRIPTION OF GIFT | 3 | DATE REC'D | 4 | GIFT VALUE | 5 | AGG. VALUE |
|---|-------|---|---------------------|---|---------------|---|---------------|---|---------------|
| | | | No gifts received | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| 1 | DONOR | 2 | DESCRIPTION OF GIFT | 3 | DATE REC'D | 4 | GIFT VALUE | 5 | AGG. VALUE |
|---|-------|---|--|---|---------------|---|---------------|---|---------------|
| | | | | | | | | | |
| | | | '06 JUN 13 A8:52 | | | | | | |
| | | | STATE OF HAWAII STATE ETHICS COMMISSION | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

____ Check here if you have attached additional sheets.

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.

Trent K. Kahuna
SIGNATURE

June 6, 2006
DATE